

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 9811643

Insp Area: 4

Site Address: 3555 AUBURN BL SAC  
Parcel No: 240-0342-005

Sub-Type: ACOM  
Housing (Y/N): N

**CONTRACTOR**  
BLAZER HOMES  
3009 DOUGLAS BL #150  
ROSEVILLE CA 95661

**OWNER**  
COUNTY OF SACRAMENTO  
4936 CRESTWOOD WY  
SACRAMENTO CA 95822

**ARCHITECT**

Nature of Work: BUILD NEW BLDG SCHOOL

**CONSTRUCTION LENDING AGENCY:** I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name \_\_\_\_\_ Lender's Address \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION:** I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

X License Class B License Number 724191 Date 8/6/99 Contractor Signature Sheng VanHalle

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00).

I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law)

I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_

Date \_\_\_\_\_ Owner Signature \_\_\_\_\_

**IN ISSUING THIS BUILDING PERMIT,** the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

X Date 8/6/99 Applicant/Agent Signature Sheng VanHalle

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier LIBERTY Mutual Policy Number WA2-6SD004147 Exp Date 4/1/2000  
-059 AS

This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

X Date 8/6/99 Applicant Signature Sheng VanHalle

**WARNING:** FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

**THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.**

9811643

DEVELOPMENT SERVICES DIVISION  
 PERMIT SERVICES SECTION  
 1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # \_\_\_\_\_ Insp. Area \_\_\_\_\_

Applicant MUST complete ALL Unshaded areas this page only

ADDRESS 3555 Auburn Blvd. Sacramento CA 95821 Suite \_\_\_\_\_  
 PARCEL # 240-0342-005

<p><b>WASCO CONTACT</b> (416-5760)                  Name <u>David [REDACTED] (Beazer Homes)</u>                  Address <u>3009 Douglas Blvd. 150</u>  <u>Roseville CA 95661</u> Zip _____                  Phone <u>[REDACTED]</u> FAX (916) <u>773-0425</u></p>	<p><b>LICENSED CONTRACTOR</b> Lic No. # <u>B724191</u>                  Name <u>Beazer Homes</u>                  Address <u>3009 Douglas Blvd. #150</u>  <u>Roseville CA 95661</u> Zip <u>95661</u>                  Phone <u>(916) 773-3888</u> FAX (916) <u>773-0425</u></p>
<p><b>ARCHITECT/ENGINEER</b>                  Name <u>Bloodgood Sharp Buster</u>                  Address <u>2356 Gold Meadow Way</u>                  Zip _____                  Phone _____ FAX _____</p>	<p><b>OWNER</b> <u>[REDACTED]</u>                  Name <u>Sacramento County</u>                  Address <u>3555 Auburn Blvd.</u>  <u>Sacramento CA</u> Zip <u>95821</u>                  Phone _____ FAX _____</p>

→ Will the permittee have any employees on the jobsite?  Yes  No  
 → If yes, WORKER'S COMPENSATION POLICY # WA245D-00414507 EXPIRATION DATE: 4/30/99  
 NAME OF INSURANCE COMPANY: Liberty Mutual Insurance Company

NATURE OF WORK IN DETAIL: Addition to Existing Children's Receiving Home.  
New ~~Building~~ Dorm Room Living Center  
PARKING LOT ON # 99-0349-C 99043400  
 DBA: \_\_\_\_\_ VALUATION: 171,000.00

FLOOD STATUS: <u>X Zone</u>		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHEL	APT	TI (-)	REM (-)	SW	FIRE	ADD	OTH
INSP. DISCIPLINES	BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Viol. File	
		<u>2012</u>		<u>R-2.2</u>	<u>V-1HR</u>	Spr <input type="checkbox"/> Alarm <input type="checkbox"/>			
(B)	(L)	(P)	(M)	(E)	(F)	(S)	(D)	(R)	

COMMENTS: Default PAYS ON PERMITS PAY REMITTANCE  
See permit Parking 98040

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No  
 BLDGFRM. (REV 05/98)  WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS  Yes  No

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE** *9 m/f*  
 PERMIT AND CALCULATION SHEET *8/16/99*

APPLICATION NO:

BLDG PERMIT NO: *City*

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER

DEPT 26 \$11,420.00  
 TR 395179 08/06/99  
 RECEIPT 23183 C#1 \$11,420.00  
*8535479 8/16/99*

THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF	UNITS
GSD-1	<input checked="" type="checkbox"/>	1,870	<input type="checkbox"/>	
SRCSD		9,540		
CONSTRUCTION				
IN-LIEU				
<b>TOTAL FEE</b>		<b>11,420</b>		

APN: *2110-0342-005*

DESCRIPTION/  
 SUBDIVISION

LOT:

PROPERTY ADDRESS *3555 Auburn Blvd*

OWNER *Children's Receiving Home*

MAILING ADDRESS *3555 Auburn Blvd*

CITY-STATE-ZIP *Sacramento CA* PHONE *773-3588*

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *Sheryl Westman*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

INSPECTOR'S COPY

# Certification of Compliance

## School District Development Fees

### Part I—To be completed by APPLICANT

Owner's name \_\_\_\_\_  
 Owners's address \_\_\_\_\_  
 Project address \_\_\_\_\_  
 Parcel number \_\_\_\_\_ Lot no. \_\_\_\_\_  
 Subdivision name \_\_\_\_\_ No. of units \_\_\_\_\_  
 Applicants signature \_\_\_\_\_ Title \_\_\_\_\_  
 Phone no. \_\_\_\_\_ Date \_\_\_\_\_

NOTICE TO APPLICANT: Pursuant to government code section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

### Part II—To be completed by BUILDING DEPARTMENT

Plan identification number \_\_\_\_\_  
 Building type (check one)  
 Residential       Apartment/condominium       Commercial/industrial  
 Square feet of chargeable building area \_\_\_\_\_  
 Signature/title \_\_\_\_\_ Date \_\_\_\_\_

### Part III—To be completed by SCHOOL DISTRICT

School district **SAN JUAN UNIFIED SCHOOL DISTRICT** Cert. no. \_\_\_\_\_  
 Exempt—Comments \_\_\_\_\_  
 Residential/apartment/etc. \_\_\_\_\_ Square ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Commercial/industrial \_\_\_\_\_ Square ft. X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Total fees collected ..... = \$ \_\_\_\_\_

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of government code section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature \_\_\_\_\_ Date \_\_\_\_\_

White & Canary-School District • Pink-Building Department • Goldenrod-Applicant

**CITY OF SACRAMENTO**  
 BUILDING INSPECTION DIVISION  
 APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

*As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form*

1. Business Name: Sacramento Children's Receiving Home Phone: 773-3588  
 Site Address: 3555 Auburn Blvd, Sacramento, CA Suite: \_\_\_\_\_  
(Street) (Zip)  
 Business Owner/Representative: Beazer Homes Phone: 773-3588  
 Nature of Business: Dormitory Addition  
 Property Owner: County of Sacramento Phone: \_\_\_\_\_  
 Address: 3555 Auburn Blvd ~~Sacram~~ Suite: \_\_\_\_\_  
Sacramento (Street) CA (City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes \_\_\_ No  Is this permit for a shell building? Yes \_\_\_ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes \_\_\_ No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes \_\_\_ No

**CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.**

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes \_\_\_ No \_\_\_

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes \_\_\_ No \_\_\_

7. Is/Will your business be located within 1,000 feet of a school? Yes \_\_\_ No \_\_\_

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes \_\_\_ No \_\_\_

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

***Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.***

**PENALTY:** Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: Sheryl VanMaren  
(Print)  
Sheryl VanMaren 8/6/99  
(Signature) (Date)

BID Use Only: Plan Ck# _____	Permit # <u>9811643</u>
OK to issue prmt? Y <u>8-6-99</u> F.D. Appr Req'd? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<small>init date</small>
Hold on Certificate of Occupancy? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	



Customer Service Group  
 PWA Water Quality Engineering for  
 SACRAMENTO REGIONAL COLLEGE DISTRICT

# PAGES: 1 DATE: 8/4 FAX #: 875 6253  
 TO: Res'l San  
 FROM: MLZ  
 CC:  
 PH # FAX #

**REQUEST FOR SEWER FEE QUOTE**

DATE	8/4/99	NUMBER OF PAGES	1
FROM	City of Sac	REQUESTOR	Beazer Homes
		FAX	264 7046 / 773-0425
TO	SRCSB Customer Service	RESPONDER	
		FAX	875-6253
		PHONE	

**URGENT** -- Applicant is in office or ready to pay permit.  
 If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.  
 Press zero to speak to the operator.  
 Rob Armstrong -  
 **NOT URGENT** -- Applicant has requested informal quote

Applicant	NAME: Sheryl Van Maren		PHONE: 773-3888
Property	ASSESSOR'S PARCEL NUMBER(S): 240 0342 005		PROPERTY ADDRESS: 3555 Auburn Bl
	PLAN CHECK # BUILDING PERMIT NO: 9811643	<small>(mark all that apply)</small> <input checked="" type="checkbox"/> New construction <input type="checkbox"/> Remodel <input type="checkbox"/> Change in use	
Project	USE	CURRENT // PREVIOUS: bare land	PLANNED: receiving home dormitory
	SQUARE FOOTAGE	CURRENT // PREVIOUS: $\emptyset$	PLANNED: 2012

9660 ECOLOGY LANE • SACRAMENTO, CALIFORNIA • 95827-3881  
 ENGINEERING (916) 875-6820 • FAX (916) 875-6253

# MESSAGE CONFIRMATION

08/04/99 10:59  
ID=DEVELOPMENT SERVICES

NO.	MODE	BOX	GROUP
840	TX		

DATE/TIME	TIME	DISTANT STATION ID	PAGES	RESULT	ERROR PAGES	S. CODE
08/04 10:58	00'28"	916 875 6253	001/001	OK		0000



Customer Service Group  
PWA Water Quality Engineering for  
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

## REQUEST FOR SEWER FEE QUOTE

DATE	8/4/99		NUMBER OF PAGES	1
FROM	City of Sac	REQUESTOR	BEAZER HOMES	FAX 264 7046 / 773-0425
TO	SRCS D Customer Service	RESPONDER		FAX 875-6253 PHONE

**URGENT** -- Applicant is in office or ready to pay permit

If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.  
Press zero to speak to the operator.

**NOT URGENT** -- Applicant has requested informal quote

Applicant	NAME X Cheryl Van Maren	PHONE 773-3888
Property	ADDRESS/PARCEL NUMBER 240 0342 005	PROPERTY ADDRESS 3555 Auburn Bl

19320



INSTALLATION CARD

Address:

Blazer -  
Childrens Rec. & Home  
Sacramento

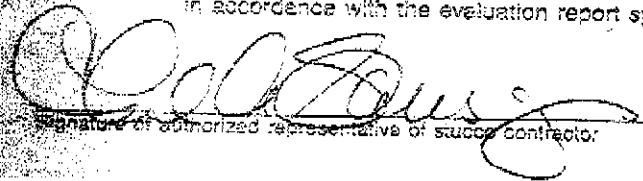
Stucco System Trade Name: KWIK KOTE  
Name Stucco Manufacturer: KWIK KOTE CORP.

ICBO Evaluation Service, Inc.  
Report No. 3607

Date of Job Completion 12/20/99

Stucco Contractor Kenyon Construction  
Name John W. Kenyon, III  
Address P.O. Box 2077  
North Highlands, CA 95660  
Telephone Number (916) 349-8191  
Approved Contractor Number as issued by the Stucco Manufacturer: 1

This is to certify that the stucco system on the building exterior at the above address had been installed in accordance with the evaluation report specified above and the manufacturer's instructions.



Signature of authorized representative of stucco contractor:

Date 1/25/00





*Copy to Microfish*

## INSPECTION CONSULTANTS, LP

**Date:** November 11, 1999  
**File:** 991-145  
**Client:** Beazer Homes  
3009 Douglas Blvd., Suite 150  
Roseville, CA 95661  
**Attention:** Ms. Anne Stamas  
**Date of Inspection:** November 3, 1999  
**Purpose of Inspection:** Verify ground resistance.  
**Local Authority:** City of Sacramento

### Inspection Report:

On November 3, 1999, a representative of our firm visited the Children's Receiving Home Dorm Addition in Sacramento, California, to perform inspection of the following:

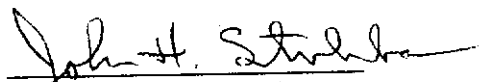
#### 1. Uffer Stub Up to verify ground resistance:

- a. Ground resistance test was performed using the fall of potential method.
- b. The test instrument used was AEMC DIGI Ground VOMEG.
- c. The measured ground resistance is 2 ohms.

Please see attached ground system field test report.

If you have any questions, or require additional information, please contact our office at (916) 635-2972.

Sincerely,  
INSPECTION CONSULTANTS, INC.

  
John H. Stubban, P.E.  
Staff Electrical Engineer

File: Reports-letters/electrical/991-145

RECEIVED  
DEC 21 1999  
BEAZER

## GROUNDING SYSTEM TEST REPORT

**Date:** November 3, 1999  
**Facility:** Children's Receiving Home Dorm Addition  
Sacramento, California  
**Client:** Beazer Homes  
3555 Auburn Blvd.  
Sacramento, CA

**EARTH GROUNDING SYSTEM RESISTANCE AS DESCRIBED,  
HAS BEEN MEASURED AS PRESCRIBED PER NFPA STANDARDS.**

**Test Location:** UFFER STUB UP

**Temperature:** 70 Degrees

**Last Measurable  
Precipitation:** 10-27-99 - .25 I incit

**Measured Resistance:** 2 ohms

**Testing Instrument:** AEMC DIGI Ground VOMEG

**Remarks:** Used the fall of potential ground resistance testing principal with two  
auxiliary rods

RECEIVED  
DEC 21 1999  
BEAZER HOMES

**MEMORANDUM**

**SACRAMENTO FIRE DEPARTMENT**

**TO:** BUILDING DEPARTMENT

**DATE:** 10-17-00

**FROM:** Troy Malaspino  
Fire Marshal

**SUBJECT:** FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

3555 Auburn Blvd

Has been conducted by Inspector

D. DeMello

On

8-31-00

98-11643-100  
Permit Number

\_\_\_\_\_  
Square Footage

FIRE ALARM  
Type of Inspection

They system is acceptable by this department.

R. Woodman  
By: Ross L. Woodman,  
Fire Prevention Officer II

98-482  
F.D. Reference Number

*C*



